

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> TELEPHONE NO.: E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>): </div> <div style="width: 45%;"> FAX NO. (<i>Optional</i>): </div> </div>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>):	CASE NUMBER:
MINOR	
PETITION FOR TERMINATION OF GUARDIANSHIP	HEARING DATE AND TIME:
	DEPT.:

1. Petitioner (*name*):

requests that
 be terminated.
 be terminated.

 - a. ☐ the guardianship of the PERSON of (*minor*):
 - b. ☐ the guardianship of the ESTATE of (*minor*):
 - (1) ☐ The estate has been entirely exhausted through expenditures or disbursements (Probate Code, § 2626).
 - (2) ☐ The estate falls within the provisions of Probate Code section 2628(b) (small estate), and no accounts have been required.
 - (3) ☐ Other (*specify*):

2. Petitioner is the ☐ minor ☐ minor's guardian ☐ minor's parent.
3. ☐ (*Name*): was appointed guardian of the PERSON
 of the minor named in item 1a on (*date*): .
4. ☐ (*Name*): was appointed guardian of the ESTATE
 of the minor named in item 1b on (*date*): .
5. It is in the best interest of the minor that the guardianship of the ☐ person ☐ estate be terminated for the reasons
☐ stated in Attachment 5 ☐ stated below (*specify*):

6. A request for special notice
 - a. ☐ has not been filed.
 - b. ☐ has been filed and notice will be given to (*names*):

7. ☐ Notice to the persons identified in Attachment 7 should be dispensed with because
 - a. ☐ they cannot with reasonable diligence be given notice (*specify names and efforts to locate in Attachment 7*).
 - b. ☐ other good cause exists to dispense with notice (*specify names and reasons in Attachment 7*).
8. ☐ Petitioner is the minor's guardian. Petitioner requests reasonable visitation with the minor after termination of the guardianship as specified in Attachment 8. A completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105/GC-120) is also attached.

NOTICE: This guardianship will terminate automatically when the child reaches age 18. No petition or court order is necessary to terminate the guardianship at that time. Nevertheless, if this is a guardianship of the estate, termination of the guardianship does not eliminate the requirement that a final report or account must be filed. (See Prob. Code, § 1600.)

GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): _____ MINOR	CASE NUMBER: _____
---	--------------------

9. The names and residence addresses of the guardian, minor, and minor's parents, brothers, sisters, and grandparents are *(specify)*:

a. Guardian:

g. Brother or sister:

b. Minor:

h. Maternal grandfather:

c. Father:

i. Maternal grandmother:

d. Mother:

j. Paternal grandfather:

e. Brother or sister:

k. Paternal grandmother:

f. Brother or sister:

l. ☐ Additional names and addresses continued on Attachment 9.

10. Number of pages attached: _____

Date: _____

(SIGNATURE OF ATTORNEY OR PETITIONER WITHOUT AN ATTORNEY *)

* (Signature of all petitioners also required (Prob. Code, § 1020).)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

CONSENT TO TERMINATION AND WAIVER OF SERVICE AND NOTICE OF HEARING

11. ☐ I consent to the termination of the guardianship of the ☐ person ☐ estate of the minor and waive service of a copy of, and notice of the hearing on, this petition.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF ☐ MINOR * ☐ GUARDIAN ☐ PARENT ☐ OTHER)

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF ☐ MINOR * ☐ GUARDIAN ☐ PARENT ☐ OTHER)

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF ☐ MINOR * ☐ GUARDIAN ☐ PARENT ☐ OTHER)

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF ☐ MINOR * ☐ GUARDIAN ☐ PARENT ☐ OTHER)

☐ Additional signatures on Attachment 11.

* Minor over 12 years of age.